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<b>TRANSMITTAL FORM</b>  (To be used for all correspondence after initial filing)	Application Number	10/019,199
	Filing Date	December 20, 2001
	First Named Inventor	Norbert Maurer
	Art Unit	1615
	Examiner Name	Gollamudi S. Kishore
	Attorney Docket No.	480208.433USPC

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement and Transmittal <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input checked="" type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) ( <i>please identify below</i> ): _____ _____ _____ _____
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Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number <b>00500</b>	
Signature			
Printed Name	Carol D. Laherty, Ph.D.		
Date	April 17, 2006	Reg. No.	51,909

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Signature		
Typed or printed name	Mellonie de Raoulx	Date: April 17, 2006



<b>REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	<b>Application Number</b>	10/019,199
	<b>Filing Date</b>	December 20, 2001
	<b>First Named Inventor</b>	Norbert Maurer
	<b>Group Art Unit</b>	1615
	<b>Examiner Name</b>	Gollamudi S. Kishore
	<b>Attorney Docket Number</b>	PAT-2700-US

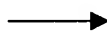
I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	<b>BARBARA M. CAMPBELL</b>
Signature	<b>Associate Director University - Industry Liaison Office</b> <i>Barbara M Campbell</i>
Date	<i>May 28 2006</i>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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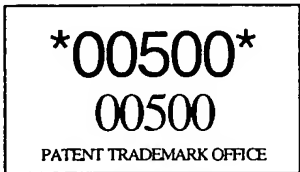
<b>ELECTION AND POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	<b>Application Number</b>	10/019,199
	<b>Filing Date</b>	December 20, 2001
	<b>First Named Inventor</b>	Norbert Maurer
	<b>Group Art Unit</b>	1615
	<b>Examiner Name</b>	Gollamudi S. Kishore
	<b>Attorney Docket Number</b>	PAT-2700-US

I hereby appoint:

☒ Practitioners at Seed Intellectual Property Law Group PLLC

OR

☐ Practitioner(s) named below:



Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

☒ As assignee of record of the entire interest I/we hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor.

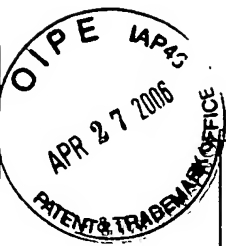
**SIGNATURE of Applicant or Assignee of Record**

Name	<b>BARBARA M. CAMPBELL</b>
Signature	Associate Director <i>Barbara M. Campbell</i>
Date	University - Industry Liaison Office <i>Mar 28 2004</i>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Norbert Maurer et al.Application No./Patent No.: 10/019,199Filed/Issue Date: December 20, 2001Entitled: Methods for Preparation of Lipid Encapsulated Therapeutic AgentsThe University of British Columbia

(Name of Assignee)

a University(Type of Assignee, e.g., corporation, partnership,  
university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by percentage) of its ownership interest is \_\_\_\_\_%

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above.  
The assignment was recorded in the United States Patent and Trademark Office at  
Reel 012622, Frame 0755, or for which a copy thereof is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the  
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1. From: Inex Pharmaceuticals  
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To: The University of British Columbia

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☐ Copies of assignments or other documents in the chain of title noted in B above are  
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[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be  
submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records  
of the USPTO. See MPEP 302.8]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Mar 28 2006  
Date

BARBARA M. CAMPBELL

Associate Director

University - Industry Liaison Office

Telephone Number \_\_\_\_\_

Barbara M. Campbell  
Signature

Title \_\_\_\_\_